JUN 1 6 2006	on Act of 19	995, no person are requ	ired to r	U.S. Pater espond to a collection	t and Trade	proved for use throu emark Office; U.S. Di ation unless it displa	gh 7/31/2006. OF	COMMEDCE	
Effective	on 12/08/20	004.			Co	mplete if Knov			
Fees pursuant to the Consolidated			1818).	Application Nu	mber	10/644,976-C	onf. #6358		
FEE TRA	NSN	ЛІТТАL	- (Filing Date		August 21, 20	003		
For F	V 20	05	Į.	First Named In	ventor	Shouhei KOZ	AKAI		
	1 20	00		Examiner Name	<u> </u>	J. Robertson			
Applicant claims small e	ntity status	s. See 37 CFR 1.27		Art Unit		1712			
TOTAL AMOUNT OF PAYM	ENT	(\$) 330.00		Attomey Docket No. 0171-1012P					
METHOD OF PAYMENT	(check a	ll that apply)							
X Check Credit Car	L	Money Order	Non		(please ide	entify): Stewart, Kolasci	h & Birch II		
For the above-identifi Charge fee(s) in X Charge any address fee(s) under 37	ed depos ndicated l litional fe	it account, the Dire	ctor is	hereby authoriz	ed to: (ch je fee(s) i)		
FEE CALCULATION									
1. BASIC FILING, SEARCH,							_		
	FIL	ING FEES Small Entity	SEA	ARCH FEES Small Entity		INATION FEES Small Entity	5		
Application Type	Fee (\$)		Fee (\$)		<u>Fee (\$</u>		Fees Pa	id (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50 -	130	65			
Plant	200	100	300	150 -	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (includin	g Reissu	es)					50	25	
Each independent claim over	3 (includ	ding Reissues)					200	100	
Multiple dependent claims							360	180	
<u>Total Claims</u> <u>Extra C</u>	aims	Fee (\$)	Fee P	aid (\$)		Multiple Depend	dent Claims		
1620=	×	=			!	Fee (\$)	Fee Paid (\$)		
Indep. Claims Extra C	aims	Fee (\$)	Fee P	aid (\$)		 .		-	
54=1	×	200.00 =	200	0.00					
3. APPLICATION SIZE FEE									

	listings under 37 CFF	R 1.52(e)), the app	lication size fee due is \$250 (\$125 for small entit C. 41(a)(1)(G) and 37 CFR 1.16(s).	•	•
	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
İ	100 = _		(round up to a whole number) x		·
4	. OTHER FEE(S)				Fees Paid (\$)
	Non-English Specifica	ition, \$130 fee (n	o small entity discount)		
	Other (e.g., late filing	surcharge): 1814	Statutory Disclaimer		130.00

SUBMITTED BY					
Signature	[L.M]	Registration No. (Attorney/Agent)	32,868	Telephone	(703) 205-8000
Name (Print/Type)	Andrew D. Meikle			Date	June 16, 2006



AME	Docket No. 0171-1012P				
Application No. Filing Date Examiner 10/644,976-Conf. #6358 August 21, 2003 J. Robertson					Art Unit
Applicant(s): Sho					
Invention: SILICO	ONE ADHESIVE	E AND ADHES	SIVE FILM		
MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 22	313-1450				
Transmitted here The fee has bee				* *	
The ree has bee	ii calculated all				
	Claims	Highest	S AS AMENI	750	
	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	16	- 20 =		x	
Independent Claims	5	- 4 =	1	x 200.00	200.00
Multiple Depen	dent Claims (ch	eck if applicabl	e)		
Other fee (pleas	se specify):	Statutory Disclair	mer		130.00
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:		330.00
Please char A duplicate X A check in t Payment by X The Directo as describe X Credit a X Charge Andrew D. Mei Attorney Reg.	al fee is require ge Deposit Acc copy of this she he amount of \$ credit card. For r is hereby auth d below. A dup any overpaymer any additional fil kle No.: 32,868	eet is enclosed 330.00 orm PTO-2038 norized to charalicate copy of the	is enclor is enclor is attached. ge and credit this sheet is each or processing the street is each	Deposit Account Nenclosed. fees required under	·
8110 Gatehous Suite 100 East P.O. Box 747	/irginia 22040-		_P		